APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE

Title:: SURGICAL ARTICLE AND METHOD

FOR TREATING FEMALE URINARY

INCONTINENCE

Attorney Docket Number:: 240993US25

Total Drawing Sheets:: 13

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: USA

Status:: FULL CAPACITY

Given Name:: Brian Middle Name:: P.

Family Name:: Watschke
City of Residence:: Eden Prairie

State or Province of Residence:: MN
Country of Residence:: USA

Street of Mailing Address:: c/o American Medical Systems

10700 Bren West Road

City of Mailing Address:: Minnetonka

State or Province of Mailing Address:: MN
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 55343

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: USA

Status:: FULL CAPACITY

Given Name:: Robert
Middle Name:: E.
Family Name:: Lund

City of Residence:: St. Michael

State or Province of Residence:: MN
Country of Residence:: USA

Street of Mailing Address:: c/o American Medical Systems

10700 Bren West Road

City of Mailing Address:: Minnetonka

State or Province of Mailing Address:: MN
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 55343

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: USA

Status:: FULL CAPACITY

Given Name:: Kimberly

Middle Name:: A.

Family Name::

City of Residence::

State or Province of Residence::

Country of Residence::

USA

Street of Mailing Address:: c/o American Medical Systems

10700 Bren West Road

City of Mailing Address:: Minnetonka

State or Province of Mailing Address:: MN
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 55343

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

ASSIGNMENT INFORMATION

Assignee Name:: American Medical Systems

Page 2 Initial 08/22/03

Street of Mailing Address:: Office of Intellectual Property Counsel

10700 Bren Road West

City of Mailing Address:: Minnetonka

State or Province of Mailing Address:: Minnesota

Country of Mailing Address:: USA

Postal or Zip Code of Mailing Address:: 55343